

OFFICIAL USE ONLY

File Name: _____

Permit # _____

Map/Lot # _____

TOWN OF WASHINGTON

HOLDING TANK PERMIT APPLICATION

If you need assistance with the completion of this application, please consult with the Code Enforcement Officer.

APPLICANT (Please print or type all information)

Name: _____

Company: _____

Mailing Address: _____

City/State/Zip: _____

Phone: () _____

Property Deed Registered in _____ County

Parcel 911 Address: _____

OWNER (if different from Applicant)

Name: _____

Company: _____

Mailing Address: _____

City/State/Zip: _____

Phone: () _____

Book and Page#: _____

Tax Map and Lot#: _____

You can obtain a 911 Address from the Town of Washington 911 Administrator. Your permit cannot be approved without this.

This holding tank is a ☐ first time ☐ replacement installation.

Attached: ☐ Copy of Deed to property

If the Applicant and the Owner are different, → you must provide evidence of Title, Right or Interest

Attached: ☐ Purchase Agreement ☐ Lease ☐ Contract ☐ Written Approval of the Owner ☐ Other:

Attached: ☐ Sketch Map showing the general location of the property.

☐ Form HHE-233, *Application/Agreement for Holding Tank Installation*

This form must include the completed Site Evaluator's Statement, Holding Tank Pumper Statement and Local Plumbing Inspector's Statement.

☐ Form HHE-200, *Subsurface Wastewater Disposal System Application* prepared by a Licensed Site Evaluator.

☐ Form HHE-300, *Holding Tank Deeds Covenant*, notarized and recorded at the Knox County Registry of Deeds.

I / we hereby agree to provide the Plumbing Inspector with copies of all plumbing records.

To the best of my knowledge, I certify that all of the information on this application is true and correct and that all uses and development permitted by the Town shall be in compliance with the Washington Land Use Ordinance as may be amended from time to time.

APPLICANT SIGNATURE: _____ DATE: _____

APPLICANT SIGNATURE: _____ DATE: _____

Please sign in blue ink

State of ~~Maine~~

County of _____

Date: _____

Then personally appeared the above named _____ (and)

_____ and (severally) acknowledged the foregoing to be his / her (or their) free act and deed.

Before me _____

Justice of the Peace or Notary Public

Printed name: _____

My Commission Expires: _____

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Date Received: _____

Fee Paid: ☐ No ☐ Yes

Amount: _____

Received by: _____

☐ Reviewed by CEO ☐ Forwarded to Planning Board → Date: _____

☐ Approved ☐ Denied → Date: _____

→ Permit#: _____

→ Reason: _____

WPB CHAIR SIGNATURE: _____

DATE: _____